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EU MAIL
Committee Name:
Draft Brian schweitzer
If registered, FEC ID:
Today's Date:
7/1/2014
Federal Election Commission
999 E Street, N.W.
Washington, D.C. 20463
Re: Form 1, Statement of Organization—Unlimited Contributions
To Whom It May Concern:
This committee intends to make independent expenditures, and consistent with
the U.S. Court of Appeals for the District of Columbia Circuit decision in
SpeechNow v. FEC, it therefore intends to raise funds in unlimited amounts. This
committee will not use those funds to make contributions, whether direct, in-kind,
or via coordinated communications, to federal candidates or committees.
Respectfully submitted,
Treasurer's Name:
Treasurer's Name.
Treasurer, Treasurer
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1403-127-2272

FORM 1

STATEMENT OF **ORGANIZATION**

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I ONIV. I		_		FECde	ite use Only	
NAME OF COMMITTEE (in	full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5	A CARLER	
Draft B	rians	chweitz	1615111111	1 1 1 1 1 1		
592 001	aght is	Tract I		111111		
ADDRESS (number an	d street) 5,9	12 mo/c	It sopred	1/20,4D		
☐ ◀ (Check if a is changed)	ddress					
	WO	CITY A		STATE A	ZIP CODE A	
COMMITTEE'S E-MA	IL ADDRESS				·	
☐ ◀ (Check if a is changed))	nal Second E-Mail Ad	idress	1 1 1 1 1 1 1 1		
COMMITTEE'S WEB (Check if a is changed	ddress _I	(URL)				
2. DATE	M / D D /	*************************************				
3. FEC IDENTIFIC	CATION NUMBER	▶ C				
4. IS THIS STATEM	IENT N	EW (N) OR	AMENDED (A)			
I certify that I have e	xamined this State	ement and to the bes	at of my knowledge and belief	it is true, correct and	d complete.	
Type or Print Name of	of Treasurer	Jachan F	rederiuser			
Signature of Treasure	ır <u>Ce</u>	A		Date 0.7	02 2014	
NOTE: Submission of			n may subject the person signing		penalties of 2 U.S.C. §437g.	
Office Use Only			For further information Federal Election Commis Toll Free 800-424-9530		FEC FORM 1 (Revised 06/2012)	

1	F	EC Fo	rm 1 (Revised 02/2009)	Page 2					
5.			OMMITTEE Committee:						
	(a)	П	This committee is a principal campaign committee. (Complete the candidate information below.	1					
				,					
	(b)	Ц	This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)						
	Name Cand			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1					
	Cand	idate Affiliati	Office on Sought: House Senate President	State					
	raity	Ailliall	on Sought: House Senate President	District					
	(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.						
	Name Cand								
	 Part	y Con	nmittee:						
	(d)		This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.					
	Polit	tical A	ction Committee (PAC):						
	(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its co	nnected organization is a:					
			Corporation Corporation w/o Capital Stock	Labor Organization					
			Membership Organization Trade Association	Cooperative					
			In addition, this committee is a Lobbyist/Registrant PAC.						
	(f)	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or committee. (i.e., nonconnected committee)							
			In addition, this committee is a Lobbyist/Registrant PAC.						
			In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)						
	Joint	t Func	Iraising Representative:						
	(g)	П	This committee collects contributions, pays fundraising expenses and disburses net proceeds for t						
	(b)		.committees/organizations, at least one of which is an authorized committee of a federal candidate						
((h)	Ц	This committee collects contributions, pays fundraising expenses and disburses net proceeds for t committees/organizations, none of which is an authorized committee of a federal candidate.	wo or more political					
		Com	mittees Participating in Joint Fundraiser						
		1.	FEC ID number C						
		2.	FEC ID number						
		3 .							
		4.							

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FEC Form 1 (Revised 02/2009) Page 3								
Write or Type Committee Nam		raye 3						
Dight Dugi	<u> </u>							
6. Name of Any Connected	Organization, Affiliated Committee, Joint Fundraising Representativ	e, or Leadership PAC Sponsor						
		11111111111						
Mailing Address								
		<u> </u>						
	CITY STATE	ZIP CODE						
Relationship: Connecte	ed Organization Affiliated Committee Joint Fundraising Represen	ntative Leadership PAC Sponsor						
 Custodian of Records: Ide books and records. 	entify by name, address (phone number optional) and position of the	person in possession of committee						
Full Name								
Mailing Address								
		<u> </u>						
Title or Position	CITY STATE	ZIP CODE						
	Telephone number							
Treasurer: List the name a any designated agent (e.g.,	nd address (phone number optional) of the treasurer of the committed assistant treasurer).	ee; and the name and address of						
Full Name of Treasurer		————————————————————————————————————						
Mailing Address								
	CITY STATE	ZIP CODE						
Title or Position		1 1 1 1						
	Telephone number							

ï

CITY

STATE

ZIP CODE

Page 4

FEC Form 1 (Revised 02/2009)

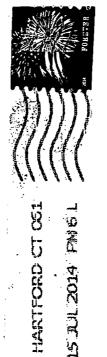
Name of Bank, Depository, etc.

Mailing Address

1403-127-2275

20463

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(8/2013)

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